



ASC Utilization Report
State Form 49933 (R3/6-05)
Indiana State Department of Health
Acute Care

Status: Finalized

I. Center Identification

Organization Name: SURGERY CENTER PLUS
Street Address: 7430 N SHADELAND AVE STE 100
City: INDIANAPOLIS
County: In
Administrator Name: Deanna McAllister
Administrator Email: dmcallister2@ecommunity.com
ASC Web Address: 7430 N SHADELAND AVE STE 100
Fiscal Year: 2041

Accredited: Yes No

Name of Accrediting Body: AAAHC

Deemed Status: Yes No

Corporate Tax Status: For Profit Non Profit

II. Identification of Surgical Resources

Number of operating rooms	3
Number of procedure rooms	1

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	2430	
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
45385	724	
45380	453	
45378	402	
g0105	248	
g0121	193	
46255	65	
45990	57	

45381	52
45330	50
46040	44

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	1
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